As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Use of Potassium	Channel	Agoniete	for Reducino	Fat Food	Concumption

The specification of which (check only one item below):

] is attached hereto

[X] was filed as United States application

Αpi	plication	No.	To Be	Assigne

on June 26, 2001 and was amended

[] was filed as PCT international application Number

on and was amended under PCT Article 19

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim priority benefits under Title 35, United States Code, §119 of any provisional or foreign application(s) for patent or inventor's certificate or of any PCT international application(s) for patent or inventor's certificate or of any PCT international applications(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL/FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicated "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)		Y CLAIMED 35 USC 119
Denmark	PA 2000 00987	26 June 2000	[X] YES	[] NO
U.S.A.	60/217,930	13 July 2000	[X] YES	[] NO
			[]YES	[]NO
			[]YES	[] NO
			[]YES	[] NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket Number:

6034.200-US

I berely claim the benefit under Title 35, United States Code '120 of any United States application(s) or PCT international application(s) designating the United States of America that is/ore I tested below and, insofar as the analyse matter of each of the claims of this applications is not disclosed in that/blose prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, '112, I acknowledge the daty to disclose maternal information as defined in Title 47, Code of Federal Regulations, 1500 which occurred between the fling date of the prov application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT

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WER OF	ATTORNEY	As a named in	ventor, I hereby app	oint the followin	g attorney(s) and/or agent(s) to prosecute	this application	and transact al	I business in the I	atent and
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nd Corre	spondence to	: Reza Green, I	Esq.		30,913		Direct Tel	lephone Calls To	
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		New York, N	ew York 10174-64						
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TRUESTANDANCE

	Address	Post Office Address	City
6	Full Name of Inventor	Family Name	First Given Name
	Residence & Citizenship	City	State or Foreign Country
	Post Office Address	Post Office Address	City
7	Full Name of Inventor	Family Name	First Given Name
	Residence & Citizenship	City	State or Foreign Country
	Post Office Address	Post Office Address	City
H s	Full Name of Inventor	Family Name	First Given Name
4	Residence & Citizenship	City	State or Foreign Country
0	Post Office Address	Post Office Address	City
n,	Full Name of Inventor	Family Name	First Given Name
	Residence & Citizenship	City	State or Foreign Country
	Post Office Address	Post Office Address	City

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

First Given Name

(Includes Reference to PCT International Applications)

City

Family Name

Post Office Address

Full Name

of Inventor Residence &

Citizenship

Pass Office

Attorney's Docket Number: 6034.200-US Second Given Name

	State or Foreign Country	Country of Citizenship
ss	City	State & Zip Code/Country
	First Given Name	Second Given Name
	State or Foreign Country	Country of Citizenship
SS	City	State & Zip Code/Country
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	State or Foreign Country	Country of Citizenship
SS	City	State & Zip Code/Country
	First Given Name	Second Given Name
	State or Foreign Country	Country of Citizenship
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I hereby declare that all statements made herem of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these attenments were made with the knowledge that willful false interments and the file so made are pushable by fine or imprisonment, or both, made section 100 of this 10 of the binded States Code, and that such willful false interments my posture the valledge of the application or any postur issuing made section 100 of this 10 of the binded States Code, and that such willful false interments my posture the valledge of the application or any postur issuing my posture in the posture of t thereon

Signature of Inventor 2	Signature of Inventor 3
Date	Date
Signature of Inventor 5	Signature of Inventor 6
Date	Date
Signature of Inventor 8	Signature of Inventor 9
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